PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

BIOS109

CLAIMS AS FILED - PART					L		SI	SMALL ENTITY		OTHER THAN		
				olumn 1)		(Column 2)		PE [OR	SMALL	ENTITY
TOTAL CLAIMS			12					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			1 minus 20=		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* 0/			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							T	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	-	TOTAL	3217	OR	TOTAL	
CLAIMS AS AMENDED - PA									77.17		OTHER	THAN
		(Column 1)		(Colu			:	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL ANA	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JETIPLE DEI	PENDEN	CLAIM			+140=		OR	+280=	
								TOTAL		00	TOTAL	
							AC	DDIT. FEE		OR	ADDIT. FEE	
		(Column 1)			mn 2) HEST	(Column 3)	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	MBER MOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	(4	OR	X\$18=	
	Independent	*	Minus	***	- 0: 4114	=		X42=		OR	X84=	Q
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	1 CLAIM			+140=		OR	+280=	esi
							L 10-	TOTAL		OR	TOTAL	7
		AL	ODIT. FEE			ADDIT. FEE						
		(Column 1) CLAIMS			imn 2) HEST	(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE
	Total	*	Minus	**		=		X\$ 9≃		OR	X\$18=	3
	Independent	*	Minus	***		=	-	X42=		OR	X84=	<i>i</i> . 8
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT O						╿┝					3
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	id For" (Total o	or Indepen	dent) is th	e highest numbe	er foun	d in the ap _l	propriate bo	x in co	olumn 1.	